

Data Collection & Reporting System (DCR)

Data Dictionary

forChildren/Youth

includes the

Partnership Assessment Form

Key Event Tracking Form

Quarterly Assessment Form

Last Updated 1/1/06

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For more information visit the DMH Performance Outcomes and Quality Improvement (POQI) Web Page at:

<http://www.dmh.ca.gov/poqi/>

Children/Youth Partnership Assessment Form

CHILDPAF.txt

Field Name	Type	Width	Description	Format/Coding
PARTNERSHIP INFORMATION				
COUNTYID	text	2	<i>Required</i> County Number (i.e., county code) <i>county/city submitting record</i>	01 - 66 See Appendix A for codes.
CCN	text	9	<i>Required</i> County client number (<i>CSI equivalent</i>)	0-9, A-Z Right justify, use left leading zeros See Appendix B for examples
PTNRDATE	num	8	<i>Required</i> Date when the partnership is established	mmddyyyy (<i>leading zeros; no placeholders</i>) See Appendix B for examples
FSTNAME	text	15	<i>Required</i> Child/youth's First Name	A-Z
LSTNAME	text	20	<i>Required</i> Child/youth's Last Name	A-Z
PROVIDER	text	4	Identifies the provider site of the services	0-9, A-Z
PROGRAMID	text	4	<i>Required</i> Full Service Partnership Program ID	0-9, A-Z
PSCID	text	12	<i>Required</i> Partnership Service Coordinator ID	0-9, A-Z
DOB	text	8	<i>Required</i> Child/youth's Date of Birth	mmddyyyy (<i>leading zeros; no placeholders</i>) See Appendix B for examples

Field Name	Type	Width	Description	Format/Coding
REFERRED	text	2	Who referred the child/youth?	01 = Self 02 = Family Member (e.g., parent, guardian, sibling, aunt, uncle, grandparent) 03 = Significant Other (e.g., boyfriend/girlfriend, spouse) 04 = Friend/Neighbor (i.e., unrelated other) 05 = School 06 = Primary Care / Medical Office 07 = Emergency Room 08 = Mental Health Facility / Community Agency 09 = Social Services Agency 10 = Substance Abuse Treatment Facility / Agency 11 = Other County/Community Agency 12 = Homeless Shelter 13 = Street Outreach 14 = Juvenile Hall / Camp / Ranch / California Youth Authority 16 = Acute Psychiatric / State Hospital 17 = Other 99 = No Answer
RESIDENTIAL INFORMATION (includes hospitalization and incarceration)				

Field Name	Type	Width	Description	Format/Coding
NOWLIVE	text	2	Indicate where the child/youth was as of 11:59 p.m. on the day BEFORE the partnership.	General Living Arrangements 01 = With one or both biological / adoptive parents 02 = With adult family member(s) other than parents – non-foster care 03 = In an apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage 05 = Foster Home (with relative) 06 = Foster Home (with non-relative) Shelter / Homeless 07 = Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent) 08 = Homeless (includes people living in their cars) Hospital 12 = Acute Medical Hospital 13 = Acute Psychiatric Hospital / Psychiatric Health Facility (PHF) 14 = State Psychiatric Hospital Residential Program 15 = Group Home (Level 0-11) 16 = Group Home (Level 12-14) 17 = Community Treatment Facility 18 = Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs) Justice Placement 22 = Juvenile Hall / Camp / Ranch 23 = California Youth Authority 26 = Other 27 = Unknown 99 = No Answer
NUMPARNT	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived with one or both biological parents.	0-998 999 = No Answer
DAYPARNT	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived with one or both biological parents.	0-366 999 = No Answer
PSTPARNT	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived with one or both biological parents.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)

Field Name	Type	Width	Description	Format/Coding
NUMFAMILY	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived with adult family member(s) other than parents – non-foster care.	0-998 999 = No Answer
DAYFAMILY	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived with adult family member(s) other than parents – non-foster care.	0-366 999 = No Answer
PSTFAMILY	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived with adult family member(s) other than parents – non-foster care.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMOWN	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in an apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage.	0-998 999 = No Answer
DAYOWN	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in an apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage.	0-366 999 = No Answer
PSTOWN	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in an apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMSTREL	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in a foster home (with relative).	0-998 999 = No Answer

Field Name	Type	Width	Description	Format/Coding
DAYFSTREL	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in a foster home (with relative).	0-366 999 = No Answer
PSTFSTREL	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in a foster home (with relative).	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMFSTRNON	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in a foster home (with non-relative).	0-998 999 = No Answer
DAYFSTRNON	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in a foster home (with non-relative).	0-366 999 = No Answer
PSTFSTRNON	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in a foster home (with non-relative).	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMSHLTR	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in an emergency shelter / temporary housing (includes people living with friends but paying no rent).	0-998 999 = No Answer
DAYSHLTR	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in an emergency shelter / temporary housing (includes people living with friends but paying no rent).	0-366 999 = No Answer
PSTSHLTR	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in an emergency shelter / temporary housing (includes people living with friends but paying no rent).	0 = No (bubble not filled in) 1 = Yes (bubble filled in)

Field Name	Type	Width	Description	Format/Coding
NUMHMLES	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences that the child/youth was homeless (includes people living in their cars).	0-998 999 = No Answer
DAYHMLES	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS that the child/youth was homeless (includes people living in their cars).	0-366 999 = No Answer
PSTHMLES	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever been homeless (includes people living in their cars).	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMACUMED	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in an acute medical hospital.	0-998 999 = No Answer
DAYACUMED	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in an acute medical hospital.	0-366 999 = No Answer
PSTACUMED	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in an acute medical hospital.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMACUPSY	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in an acute psychiatric hospital / psychiatric health facility (PHF).	0-998 999 = No Answer
DAYACUPSY	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in an acute psychiatric hospital / psychiatric health facility (PHF).	0-366 999 = No Answer
PSTACUPSY	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in an acute psychiatric hospital / psychiatric health facility (PHF).	0 = No (bubble not filled in) 1 = Yes (bubble filled in)

Field Name	Type	Width	Description	Format/Coding
NUMSTPSY	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in a state psychiatric hospital.	0-998 999 = No Answer
DAYSTPSY	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in a state psychiatric hospital.	0-366 999 = No Answer
PSTSTPSY	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in a state psychiatric hospital.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMGRP11	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in a group home (Level 0-11).	0-998 999 = No Answer
DAYGRP11	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in a group home (Level 0-11).	0-366 999 = No Answer
PSTGRP11	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in a group home (Level 0-11).	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMGRP14	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in a group home (Level 12-14).	0-998 999 = No Answer
DAYGRP14	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in a group home (Level 12-14).	0-366 999 = No Answer
PSTGRP14	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in a group home (Level 12-14).	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMCTF	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in a community treatment facility.	0-998 999 = No Answer

Field Name	Type	Width	Description	Format/Coding
DAYCTF	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in a community treatment facility.	0-366 999 = No Answer
PSTCTF	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in a community treatment facility.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMRESTX	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences the child/youth lived in a licensed residential treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs).	0-998 999 = No Answer
DAYRESTX	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS the child/youth lived in a licensed residential treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs).	0-366 999 = No Answer
PSTRESTX	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever lived in a licensed residential treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs).	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMJUVE	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences that the child/youth has been in Juvenile Hall / Camp / Ranch.	0-998 999 = No Answer
DAYJUVE	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS that the child/youth has been in Juvenile Hall / Camp / Ranch.	0-366 999 = No Answer
PSTJUVE	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever been in Juvenile Hall / Camp / Ranch.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)

Field Name	Type	Width	Description	Format/Coding
NUMCYA	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences that the child/youth has been in the California Youth Authority.	0-998 999 = No Answer
DAYCYA	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS that the child/youth has been in the California Youth Authority.	0-366 999 = No Answer
PSTCYA	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever been in the California Youth Authority.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMOTHER	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences that the child/youth has been in any 'other' setting.	0-998 999 = No Answer
DAYOTHER	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS that the child/youth has been in any 'other' setting.	0-366 999 = No Answer
PSTOTHER	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth has ever been in any 'other' setting.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NUMUNK	num	3	DURING THE PAST 12 MONTHS, indicate the total number of occurrences that the child/youth's living situation was 'unknown.'	0-998 999 = No Answer
DAYUNK	num	3	DURING THE PAST 12 MONTHS, indicate the total number of DAYS that the child/youth's living situation was 'unknown.'	0-366 999 = No Answer
PSTUNK	text	1	PRIOR TO THE LAST 12 MONTHS, indicate if the child/youth's living situation has ever been 'unknown'.	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
EDUCATION				

Field Name	Type	Width	Description	Format/Coding
HIGRADE	text	2	What was the child/youth's highest level of education attained?	01 = Day Care 02 = Preschool 03 = Kindergarten 04 = 1 st grade 05 = 2 nd grade 06 = 3 rd grade 07 = 4 th grade 08 = 5 th grade 09 = 6 th grade 10 = 7 th grade 11 = 8 th grade 12 = 9 th grade 13 = 10 th grade 14 = 11 th grade 15 = GED coursework 16 = High School diploma / GED 17 = Less than 2 years college / Some Technical/Vocational Training 18 = AA Degree 19 = Technical/Vocational Degree 26 = Level Unknown (e.g., child/youth in non-public school) 99 = No Answer
SEDSPECED	text	1	Is the child/youth CURRENTLY receiving special education due to serious emotional disturbance?	0 = No 1 = Yes 9 = No Answer
OTHSPECED	text	1	Is the child/youth CURRENTLY receiving special education due to another reason?	0 = No 1 = Yes 9 = No Answer
LSTATTEND	text	1	Estimate the child/youth's attendance level DURING THE PAST 12 MONTHS.	0 = Never Attends School 1 = Infrequently Attends School 2 = Sometimes Attends School 3 = Attends School Most of the Time 4 = Always Attends School (never truant) 9 = No Answer
NOWATTEND	text	1	Estimate the child/youth's attendance level CURRENTLY.	0 = Never Attends School 1 = Infrequently Attends School 2 = Sometimes Attends School 3 = Attends School Most of the Time 4 = Always Attends School (never truant) 9 = No Answer

Field Name	Type	Width	Description	Format/Coding
NOWGRADE	text	1	If the child/youth attends school, CURRENTLY, his/her grades are:	1 = Poor 2 = Below Average 3 = Average 4 = Good 5 = Very Good 9 = No Answer
LSTGRADE	text	1	If the child/youth attends school, DURING THE PAST 12 MONTHS, his/her grades are:	1 = Poor 2 = Below Average 3 = Average 4 = Good 5 = Very Good 9 = No Answer
SUSPEND	num	2	DURING THE PAST 12 MONTHS, how many times has s/he been suspended?	0-98 99 = No Answer
EXPELLED	num	2	DURING THE PAST 12 MONTHS, how many times has s/he been expelled?	0-98 99 = No Answer
EMPLOYMENT				
LSTPDCOMP	num	2	DURING THE PAST 12 MONTHS, how many weeks was the child/youth employed in paid competitive work?	0-52 99 = No Answer
NOWPDCOMP	text	1	CURRENTLY, is the child/youth employed in paid competitive work?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTPDTRAN	num	2	DURING THE PAST 12 MONTHS, how many weeks was the child/youth employed in paid supported / transitional work (job open to competition with other clients)?	0-52 99 = No Answer
NOWPDTRAN	text	1	CURRENTLY, is the child/youth employed in paid supported / transitional work (job open to competition with other clients)?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTPDINHOS	num	2	DURING THE PAST 12 MONTHS, how many weeks was the child/youth employed in paid in-house work (work experience, job not open to competition)?	0-52 99 = No Answer

Field Name	Type	Width	Description	Format/Coding
NOWPDINHOS	text	1	CURRENTLY, is the child/youth employed in paid in-house work (work experience, job not open to competition)?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTNONPD	num	2	DURING THE PAST 12 MONTHS, how many weeks was the child/youth employed in non-paid (volunteer) work?	0-52 99 = No Answer
NOWNONPD	text	1	CURRENTLY, is the child/youth employed in non-paid (volunteer) work?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTOTHEMP	num	2	DURING THE PAST 12 MONTHS, how many weeks was the youth employed in other employment-type activities (e.g., can collecting, mowing lawns, babysitting)?	0-52 99 = No Answer
NOWOTHEMP	text	1	CURRENTLY, is the youth employed in other employment-type activities (e.g., can collecting, mowing lawns, babysitting)?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTNOEMP	num	2	DURING THE PAST 12 MONTHS, for how many weeks was the child/youth unemployed?	0-52 99 = No Answer
NOWNOEMP	text	1	CURRENTLY, is the child/youth unemployed?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWHOURS	num	2	On average, how many hours per week did the child/youth work LAST MONTH?	0-99 Leave blank if no answer.
NOWINCOME	num	5	How much did the child/youth earn from employment LAST MONTH?	0-99999 Leave blank if no answer.
LSTHOURS	num	2	On average, how many hours per week did the child/youth work DURING THE PAST 12 MONTHS?	0-99 Leave blank if no answer.
LSTINCOME	num	6	On average, how much did the child/youth earn from employment DURING THE PAST 12 MONTHS?	0-999999 Leave blank if no answer.
EMPGOAL	text	1	Does one of the child/youth's current recovery goals include any kind of employment at this time?	0 = No 1 = Yes 9 = No Answer

Field Name	Type	Width	Description	Format/Coding
SOURCES OF FINANCIAL SUPPORT				
LSTCARE	text	1	DURING THE PAST 12 MONTHS, was the child/youth's caregiver's wages used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWCARE	text	1	CURRENTLY, is the child/youth's caregiver's wages used to meet the needs of the child/youth's?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTWAGE	text	1	DURING THE PAST 12 MONTHS, was the youth's wages used to meet the needs of the youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWWAGE	text	1	CURRENTLY, is the youth's wages used to meet the needs of the youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTSPOUS	text	1	DURING THE PAST 12 MONTHS, was the youth's spouse / significant other's wages used to meet the needs of the youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSPOUS	text	1	CURRENTLY, is the youth's spouse / significant other's wages used to meet the needs of the youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTSAVE	text	1	DURING THE PAST 12 MONTHS, were savings used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSAVE	text	1	CURRENTLY, are savings used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTCHILD	text	1	DURING THE PAST 12 MONTHS, was child support used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWCHILD	text	1	CURRENTLY, is child support used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTFAM	text	1	DURING THE PAST 12 MONTHS, was financial support from an other family member / friend used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWFAM	text	1	CURRENTLY, is financial support from an other family member / friend used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)

Field Name	Type	Width	Description	Format/Coding
LSTRETIRE	text	1	DURING THE PAST 12 MONTHS, was retirement / social security income used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWRETIRE	text	1	CURRENTLY, is retirement / social security income used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTVET	text	1	DURING THE PAST 12 MONTHS, were veteran's assistance benefits used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWVET	text	1	CURRENTLY, are veteran's assistance benefits used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTLOAN	text	1	DURING THE PAST 12 MONTHS, was a loan / credit used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWLOAN	text	1	CURRENTLY, is a loan / credit used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTSUBSDY	text	1	DURING THE PAST 12 MONTHS, was a housing subsidy used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSUBSDY	text	1	CURRENTLY, is a housing subsidy used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTGENAST	text	1	DURING THE PAST 12 MONTHS, was general relief / general assistance used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWGENAST	text	1	CURRENTLY, is general relief / general assistance used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTSTAMP	text	1	DURING THE PAST 12 MONTHS, were food stamps used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSTAMP	text	1	CURRENTLY, are food stamps used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)

Field Name	Type	Width	Description	Format/Coding
LSTTANF	text	1	DURING THE PAST 12 MONTHS, was Temporary Assistance for Needy Families (TANF) used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWTANF	text	1	CURRENTLY, is Temporary Assistance for Needy Families (TANF) used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTSSI	text	1	DURING THE PAST 12 MONTHS, was Supplemental Security Income / State Supplementary Payment used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSSI	text	1	CURRENTLY, is Supplemental Security Income / State Supplementary Payment used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTSSDI	text	1	DURING THE PAST 12 MONTHS, was Social Security Disability Insurance used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSSDI	text	1	CURRENTLY, is Social Security Disability Insurance used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTSDI	text	1	DURING THE PAST 12 MONTHS, was State Disability Insurance used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSDI	text	1	CURRENTLY, is State Disability Insurance used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LSTTRIBE	text	1	DURING THE PAST 12 MONTHS, were American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements) used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWTRIBE	text	1	CURRENTLY, are American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements) used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)

Field Name	Type	Width	Description	Format/Coding
LSTOTHBEN	text	1	DURING THE PAST 12 MONTHS, were 'Other' benefits used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWOTHBEN	text	1	CURRENTLY, are 'Other' benefits used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LEGAL ISSUES / DESIGNATIONS				
LSTAREST	num	2	Indicate the number of times the child/youth was arrested DURING THE PAST 12 MONTHS.	0-98 99 = No Answer
EVRAREST	text	1	Has the child/youth been arrested PRIOR TO THE LAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
NOWPRBTN	text	1	Is the child/youth CURRENTLY on probation?	0 = No 1 = Yes 9 = No Answer
LSTPRBTN	text	1	Was the child/youth on probation DURING THE PAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
EVRPRBTN	text	1	Has the child/youth been on probation PRIOR TO THE LAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
NOWPAROL	text	1	Is the child/youth CURRENTLY on parole?	0 = No 1 = Yes 9 = No Answer
LSTPAROL	text	1	Was the child/youth on parole DURING THE PAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
EVRPAROL	text	1	Has the child/youth been on parole PRIOR TO THE LAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
NOWCONSRV	text	1	Is the child/youth CURRENTLY on conservatorship?	0 = No 1 = Yes 9 = No Answer
LSTCONSRV	text	1	Was the child/youth on conservatorship DURING THE PAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
EVRCONSRV	text	1	Has the child/youth been on conservatorship PRIOR TO THE LAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer

Field Name	Type	Width	Description	Format/Coding
NOWPAYEE	text	1	Does the child/youth CURRENTLY have a payee?	0 = No 1 = Yes 9 = No Answer
LSTPAYEE	text	1	Did the child/youth have a payee DURING THE PAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
EVRPAYEE	text	1	Did the child/youth have a payee PRIOR TO THE LAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
NOWDEPNDT	text	1	Is the child/youth CURRENTLY a dependant of the court?	0 = No 1 = Yes 9 = No Answer
LSTDEPNDT	text	1	Was the child/youth a dependant of the court DURING THE PAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
EVRDEPNDT	text	1	Was the child/youth a dependant of the court PRIOR TO THE LAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
YRDEPNDT	num	4	If the child/youth has ever been a dependant of the court, indicate the year the child/youth first placed on W&I Code 300 status.	9999 = No Answer
NUM300	num	2	Indicate the total number of children the child/youth CURRENTLY has who are placed on W&I Code 300 status.	0-98 99 = No Answer
NUMFOSTER	num	2	Indicate the total number of children the child/youth CURRENTLY has who are placed in foster care.	0-98 99 = No Answer
NUMUNIFED	num	2	Indicate the total number of children the child/youth CURRENTLY has who are reunified with the client.	0-98 99 = No Answer
NUMADOPT	num	2	Indicate the total number of children the child/youth CURRENTLY has who are adopted out.	0-98 99 = No Answer
EMERGENCY INTERVENTION				

Field Name	Type	Width	Description	Format/Coding
PHYSEMERG	num	2	Please indicate the number of emergency intervention the child/youth had DURING THE PAST 12 MONTHS for the following reasons: PHYSICAL HEALTH RELATED	0-98 99 = No Answer
MHSAEMERG	num	2	Please indicate the number of emergency intervention the child/youth had DURING THE PAST 12 MONTHS for the following reasons: MENTAL HEALTH / SUBSTANCE ABUSE RELATED	0-98 99 = No Answer
HEALTH STATUS				
NOWDOCTR	text	1	Does the child/youth have a primary care physician CURRENTLY?	0 = No 1 = Yes 9 = No Answer
LSTDCTR	text	1	Did the child/youth have a primary care physician DURING THE PAST 12 MONTHS?	0 = No 1 = Yes 9 = No Answer
SUBSTANCE ABUSE				
DUALDX	text	1	In the opinion of the partnership service coordinator, does the child/youth have a co-occurring mental illness and substance use problem?	0 = No 1 = Yes 9 = No Answer
ACTIVPRB	text	1	Is this an active problem?	0 = No 1 = Yes 9 = No Answer
DUALDXSVC	text	1	Is the child/youth CURRENTLY receiving substance abuse services?	0 = No 1 = Yes 9 = No Answer
COUNTY USE FIELDS				
CNTY1KET	text	15	Key Event Tracking: County Use Field #1	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.

Field Name	Type	Width	Description	Format/Coding
CNTY2KET	text	15	Key Event Tracking: County Use Field #2	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.
CNTY3KET	text	15	Key Event Tracking: County Use Field #3	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.
CNTY13M	text	15	Quarterly: County Use Field #1	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.
CNTY23M	text	15	Quarterly: County Use Field #2	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.
CNTY33M	text	15	Quarterly: County Use Field #3	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.

Children/Youth

Key Event Tracking Form

CHILDKET.txt

Field Name	Type	Width	Description	Format/Coding
PARTNERSHIP INFORMATION				
COUNTYID	text	2	<i>Required</i> County Number (i.e., county code) <i>county/city submitting record</i>	01 - 66 See Appendix A for codes.
CCN	text	9	<i>Required</i> County client number (<i>CSI equivalent</i>)	0-9, A-Z Right justify, use left leading zeros See Appendix B for examples
DOB	text	8	<i>Required</i> Child/youth's Date of Birth	mmddyyyy (<i>leading zeros; no placeholders</i>) See Appendix B for examples
FSTNAME	text	15	<i>Required</i> Child/youth's First Name	A-Z
LSTNAME	text	20	<i>Required</i> Child/youth's Last Name	A-Z
CHANGE IN ADMINISTRATIVE INFORMATION				
PROVIDATE	num	8	Date of Provider Site ID change.	mmddyyyy (<i>leading zeros; no placeholders</i>) See Appendix B for examples
PROVIDER	text	4	New Provider Site ID.	0-9, A-Z
PROGDATE	num	8	Date of Full Service Partnership Program ID change.	mmddyyyy (<i>leading zeros; no placeholders</i>) See Appendix B for examples
PROGRAMID	text	4	New Full Service Partnership Program ID.	0-9, A-Z
PSCDATE	num	8	Date of Partnership Service Coordinator change.	mmddyyyy (<i>leading zeros; no placeholders</i>) See Appendix B for examples
PSCID	text	12	New Partnership Service Coordinator ID.	0-9, A-Z

Field Name	Type	Width	Description	Format/Coding
DISENROLL	num	8	Date of Disenrolled from Partnership.	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
RESIDENTIAL INFORMATION (includes hospitalization and incarceration)				
LIVDATE	num	8	Date of Residential Status change (includes hospitalization and incarceration).	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
NOWLIVE	text	2	Indicate the new residential status.	General Living Arrangements 01 = With one or both biological / adoptive parents 02 = With adult family member(s) other than parents – non-foster care 03 = In an apartment or house alone / with spouse / partner / minor children / other dependents / roommate – must hold lease or share in rent / mortgage 05 = Foster Home (with relative) 06 = Foster Home (with non-relative) Shelter / Homeless 07 = Emergency Shelter / Temporary Housing (includes people living with friends but paying no rent) 08 = Homeless (includes people living in their cars) Hospital 12 = Acute Medical Hospital 13 = Acute Psychiatric Hospital / Psychiatric Health Facility (PHF) 14 = State Psychiatric Hospital Residential Program 15 = Group Home (Level 0-11) 16 = Group Home (Level 12-14) 17 = Community Treatment Facility 18 = Licensed Residential Treatment (includes crisis, short-term, long-term, substance abuse, dual diagnosis residential programs) Justice Placement 22 = Juvenile Hall / Camp / Ranch 23 = California Youth Authority 26 = Other 27 = Unknown 99 = No Answer
EDUCATION				
GRADEDATE	num	8	Date of Grade Level completion.	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples

Field Name	Type	Width	Description	Format/Coding
HIGRADE	text	2	Level of Education completed.	1 = Day Care 2 = Preschool 3 = Kindergarten 4 = 1 st grade 5 = 2 nd grade 6 = 3 rd grade 7 = 4 th grade 8 = 5 th grade 9 = 6 th grade 10 = 7 th grade 11 = 8 th grade 12 = 9 th grade 13 = 10 th grade 14 = 11 th grade 15 = GED coursework 16 = High School diploma / GED 17 = Less than 2 years college / Some Technical/Vocational Training 18 = AA Degree 19 = Technical/Vocational Degree 26 = Level Unknown (e.g., child/youth in non-public school) 99 = No Answer
SUSPENDATE	num	8	Date of Suspension	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
EXPELLEDATE	num	8	Date of Expulsion	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
EMPLOYMENT				
EMPDATE	num	8	Date of Employment change.	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
NOWPDCOMP	text	1	CURRENTLY, is the child/youth employed in paid competitive work?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWPDTRAN	text	1	CURRENTLY, is the child/youth employed in paid supported / transitional work (job open to competition with other clients)?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWPDINHOS	text	1	CURRENTLY, is the child/youth employed in paid in-house work (work experience, job not open to competition)?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)

Field Name	Type	Width	Description	Format/Coding
NOWNONPD	text	1	CURRENTLY, is the child/youth employed in non-paid (volunteer) work?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWOTHEMP	text	1	CURRENTLY, is the youth employed in other employment-type activities (e.g., can collecting, mowing lawns, babysitting)?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWNOEMP	text	1	CURRENTLY, is the child/youth unemployed?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LEGAL ISSUES / DESIGNATIONS				
ARESTDATE	num	8	Date Child/youth Arrested	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
PRBTNDATE	num	8	Date of Probation Status change	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
PRBTNTYP	text	1	Indicate new Probation Status	1 = Removed From Probation 2 = Placed on Probation 9 = No Answer
PAROLDATE	num	8	Date of Parole Status change	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
PAROLTYP	text	1	Indicate new Parole Status	1 = Removed From Parole 2 = Placed on Parole 9 = No Answer
CONSRVDATE	num	8	Date of Conservatorship Status change	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
CONSRVTYP	text	1	Indicate new Conservatorship Status	1 = Removed From Conservatorship 2 = Placed on Conservatorship 9 = No Answer
PAYEEDATE	num	8	Date of Payee Status change	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
PAYEETYP	text	1	Indicate new Payee Status	1 = Removed From Payee Status 2 = Placed on Payee Status 9 = No Answer
DEPNDDATE	num	8	Date of W&I Code 300 Status change	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
DEPNDTYP	text	1	Indicate new W&I Code 300 Status	1 = Removed From W&I Code 300 Status 2 = Placed on W&I Code 300 Status 9 = No Answer
EMERGENCY INTERVENTION				
EMERGDATE	num	8	Date of Emergency Intervention	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples

Field Name	Type	Width	Description	Format/Coding
EMERGTyp	text	1	Indicate the type of Emergency Intervention	1 = Physical Health Related 2 = Mental Health / Substance Abuse Related 9 = No Answer
COUNTY USE FIELDS				
CNTY1KETDAT	num	8	Date of Key Event Tracking County Use Field #1 Change	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
CNTY1KET	text	15	Key Event Tracking: County Use Field #1	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.
CNTY2KETDAT	num	8	Date of Key Event Tracking County Use Field #2 Change	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
CNTY2KET	text	15	Key Event Tracking: County Use Field #2	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.
CNTY3KETDAT	num	8	Date of Key Event Tracking County Use Field #3 Change	mmddyyyy (leading zeros; no placeholders) See Appendix B for examples
CNTY3KET	text	15	Key Event Tracking: County Use Field #3	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.

Children/Youth Quarterly Assessment Form

CHILD3M.txt

Field Name	Type	Width	Description	Format/Coding
PARTNERSHIP INFORMATION				
COUNTYID	text	2	<i>Required</i> County Number (i.e., county code) <i>county/city submitting record</i>	01 - 66 See Appendix A for codes.
CCN	text	9	<i>Required</i> County client number (<i>CSI equivalent</i>)	0-9, A-Z Right justify, use left leading zeros See Appendix B for examples
ASSESSDATE	num	8	<i>Required</i> Assessment Date.	mmddyyyy (<i>leading zeros; no placeholders</i>) See Appendix B for examples
FSTNAME	text	15	<i>Required</i> Child/youth's First Name	A-Z
LSTNAME	text	20	<i>Required</i> Child/youth's Last Name	A-Z
DOB	text	8	<i>Required</i> Child/youth's Date of Birth	mmddyyyy (<i>leading zeros; no placeholders</i>) See Appendix B for examples
EDUCATION				
SEDSPECED	text	1	Is the child/youth CURRENTLY receiving special education due to serious emotional disturbance?	0 = No 1 = Yes 9 = No Answer
OTHSPECED	text	1	Is the child/youth CURRENTLY receiving special education due to another reason?	0 = No 1 = Yes 9 = No Answer

Field Name	Type	Width	Description	Format/Coding
NOWATTEND	text	1	Estimate the child/youth's attendance level CURRENTLY.	0 = Never Attends School 1 = Infrequently Attends School 2 = Sometimes Attends School 3 = Attends School Most of the Time 4 = Always Attends School (never truant) 9 = No Answer
NOWGRADE	text	1	CURRENTLY, his/her grades are:	1 = Poor 2 = Below Average 3 = Average 4 = Good 5 = Very Good 9 = No Answer
EMPLOYMENT				
NOWHOURS	num	2	On average, how many hours per week did the child/youth work LAST MONTH?	0-99 Leave Blank if No Answer.
NOWINCOME	num	5	How much did the child/youth earn from employment LAST MONTH?	0-99999 Leave Blank if No Answer.
EMPGOAL	text	1	Does one of the child/youth's current recovery goals include any kind of employment at this time?	0 = No 1 = Yes 9 = No Answer
SOURCES OF FINANCIAL SUPPORT				
NOWCARE	text	1	CURRENTLY, is the child/youth's caregiver's wages used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWWAGE	text	1	CURRENTLY, is the youth's wages used to meet the needs of the youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSPOUS	text	1	CURRENTLY, is the youth's spouse / significant other's wages used to meet the needs of the youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSAVE	text	1	CURRENTLY, are savings used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWCHILD	text	1	CURRENTLY, is child support used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWFAM	text	1	CURRENTLY, is financial support from an other family member / friend used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)

Field Name	Type	Width	Description	Format/Coding
NOWRETIRE	text	1	CURRENTLY, is retirement / social security income used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWVET	text	1	CURRENTLY, are veteran's assistance benefits used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWLOAN	text	1	CURRENTLY, is a loan / credit used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSUBSDY	text	1	CURRENTLY, is a housing subsidy used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWGENAST	text	1	CURRENTLY, is general relief / general assistance used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSTAMP	text	1	CURRENTLY, are food stamps used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWTANF	text	1	CURRENTLY, is Temporary Assistance for Needy Families (TANF) used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSSI	text	1	CURRENTLY, is Supplemental Security Income / State Supplementary Payment used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSSDI	text	1	CURRENTLY, is Social Security Disability Insurance used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWSDI	text	1	CURRENTLY, is State Disability Insurance used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWTRIBE	text	1	CURRENTLY, are American Indian Tribal Benefits (e.g., per capita, revenue sharing, trust disbursements) used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
NOWOTHBEN	text	1	CURRENTLY, are 'Other' benefits used to meet the needs of the child/youth?	0 = No (bubble not filled in) 1 = Yes (bubble filled in)
LEGAL ISSUES / DESIGNATIONS				

Field Name	Type	Width	Description	Format/Coding
NUM300	num	2	Indicate the total number of children the child/youth CURRENTLY has who are placed on W&I Code 300 status?	0-98 99 = No Answer
NUMFOSTER	num	2	Indicate the total number of children the child/youth CURRENTLY has who are placed in foster care?	0-98 99 = No Answer
NUMUNIFIED	num	2	Indicate the total number of children the child/youth CURRENTLY has who are reunified with the client?	0-98 99 = No Answer
NUMADOPT	num	2	Indicate the total number of children the child/youth CURRENTLY has who are adopted out?	0-98 99 = No Answer
HEALTH STATUS				
NOWDOCTR	text	1	Does the child/youth have a primary care physician CURRENTLY?	0 = No 1 = Yes 9 = No Answer
DUALDX	text	1	In the opinion of the partnership service coordinator, does the child/youth have a co-occurring mental illness and substance use problem?	0 = No 1 = Yes 9 = No Answer
ACTIVPRB	text	1	Is this an active problem?	0 = No 1 = Yes 9 = No Answer
DUALDXSVC	text	1	Is the child/youth CURRENTLY receiving substance abuse services?	0 = No 1 = Yes 9 = No Answer
COUNTY USE FIELDS				
CNTY13M	text	15	Quarterly: County Use Field #1	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.
CNTY23M	text	15	Quarterly: County Use Field #2	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.

Field Name	Type	Width	Description	Format/Coding
CNTY33M	text	15	Quarterly: County Use Field #3	15 character field 0-9, A-Z This item is not required by DMH. If used, data will be collected and returned to counties for their use.

DRAFT

Appendix A: County Codes

Code	Name
01	Alameda
02	Alpine
03	Amador
04	Butte
05	Calaveras
06	Colusa
07	Contra Costa
08	Del Norte
09	El Dorado
10	Fresno
11	Glenn
12	Humboldt
13	Imperial
14	Inyo
15	Kern
16	Kings
17	Lake
18	Lassen
19	Los Angeles
20	Madera
21	Marin
22	Mariposa
23	Mendocino
24	Merced
25	Modoc
26	Mono
27	Monterey
28	Napa
29	Nevada
30	Orange

Code	Name
31	Placer
32	Plumas
33	Riverside
34	Sacramento
35	San Benito
36	San Bernardino
37	San Diego
38	San Francisco
39	San Joaquin
40	San Luis Obispo
41	San Mateo
42	Santa Barbara
43	Santa Clara
44	Santa Cruz
45	Shasta
46	Sierra
47	Siskiyou
48	Solano
49	Sonoma
50	Stanislaus
52	Tehama
53	Trinity
54	Tulare
55	Tuolumne
56	Ventura
57	Yolo
63	Sutter/Yuba
65	Berkeley City
66	Tri-City

Appendix B: Explanation of Data Format

XML Formatting

Counties using their own technology to collect information must send the Full Service Partnership data to the State via the DMH-provided XML Schema which will be published at a later date

CCN

Consumer 1 and *Consumer 3* have county client numbers which are seven and eight characters wide instead of the nine characters allocated in the Data Dictionary (county client number widths vary across counties). Notice that the field values are right-justified with leading zero's added to fill vacant columns in CCN's with less than 9 characters.

DOB

Notice for *Consumer 1* and *Consumer 3* the date values in the Date of Birth columns (positions 10-17) are in the MMDDYYYY format, have leading zeros, and do *not* include placeholders. For example, for *Consumer 1* notice that columns numbered 10 and 11 (which indicate month) and columns numbered 12 and 13 (which indicate day) each have a leading zero. *Consumer 3* has an estimated year of birth and zero for month and day of birth. This conforms to the CSI requirements regarding missing date of birth information.

When the complete date of birth is unknown, as much of the date as is known shall be reported. If nothing is known, estimate and report an approximate year of birth and use zeros for the month and day. If only the age in years is known, calculate the year of birth and use zeros for the month and day. If the year and month of birth are known, but the exact day of birth is not, report the year and month only, and use zeros for the day.